

# Application For Lead-Based Paint Certification – Individual Renewal

Department of Community Trade and Economic Development  
Lead-Based Paint Program  
PO Box 42525, Olympia, Washington 98504-2525  
360-586-LEAD (5323)  
Fax 360-586-5880

## For Department use only

Cert. # \_\_\_\_\_  
Issuance Date \_\_\_\_\_  
Expiration Date \_\_\_\_\_

***I am applying to renew my certification in the following discipline(s): (check all that apply)***

- ☐ Risk Assessor      ☐ Supervisor      ☐ Project Designer  
☐ Inspector      ☐ Worker

**Fees** - \$25 for each discipline. Make checks payable to CTED.

## Application must be complete and legible

***Note: If your certification is expired or you have not been certified by CTED before, you are not eligible for renewal using this form. You must complete the application for new certification and meet all the requirements listed in WAC 365-230.***

Cert. No. \_\_\_\_\_ Name: \_\_\_\_\_  
Last First M.I.

Social Security Number (REQUIRED BY LAW): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Residence Mailing Address:

### ***Send mail to my:***

- ☐ Home Address  
☐ Work Address

Number Street Apt. #

City State Zip Code

Home Telephone # FAX #

Email Address

Business or Firm Name:

Firm Mailing Address:

Number Street Suite #

City State Zip Code

Work Telephone # Mobile/Cellular # FAX #

## Application Checklist

- ☐ Application Signed      ☐ Documentation of Lead-Based Paint Refresher Training  
☐ Two Recent Passport Photos      ☐ Application Fee(s)

**I certify that I have read and shall comply with Chapter 365-230 WAC and the provisions therein, and that the information and documentation given in this application is complete and accurate to the best of my knowledge.**

Signature  
of Applicant: \_\_\_\_\_ Date Signed: \_\_\_\_\_